



UNIVERSITY LIBRARY
MSC 3475
New Mexico State University
PO Box 30006
Las Cruces, NM 88003-8006

Date: _____

To: **Service Desk Staff**

From: _____

Subject: **Faculty Authorization**

Please authorize: _____
(Name and NMSU Banner ID #)

to check out library material in my name from the NMSU Library. Information regarding my account is supplied below. This authorization is valid through _____.

I understand that I may extend this authorization to no more than two students or staff members at any one time, and that I am assuming responsibility for all materials charged out in my name. Thank you.

Account to which items will be charged
Please Print

Name: _____

Dept: _____

NMSU Banner ID #: _____

Phone: _____

Signature: _____